PTO/SB/06 (08-03) Approved for use through 7/31/2006. OMB 0651-0032

OR

OR

OR

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ADD'L FEE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it diaglays a valid OMB control number Application of Docker Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY (Column 1) SMALL ENTITY (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR.1.16(c)) minus 20 = x s X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) 3 OR X \$ MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR \* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS. HIGHEST PRESENT REMAINING NUMBER RATE ADDI-ADDI-RATE ENDMENT **AFTER PREVIOUSLY EXTRA** TIONAL TIONAL WENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) 54 Minus x:50 OR Minus Independent (37 CFR 1.16(b)) Ю OR ₹ +=180 +5360 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\mathbf{\omega}$ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDL ENT **AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE ENDMI Total Minus (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O REMAINING NUMBER PRESENT RATE ADDI-RATE ADDI-ENDMENT AFTER **PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b))

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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of information is required by 37 CFR 1.16. The information is required to optian or retain a benefit by the public which is to the latter by the public which is the latter by th ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL

ADD'L FEE

<sup>\*</sup> If the entry in column 1 is less than the only in column 2, write 00 in column 3.

<sup>&</sup>quot;If the "Highest Number Previously Paid For" th THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Applicat	on or Docket Number
$\Omega$	557589
7.	JX01

(Column 1) (Column 2)					SMA	LL ENTITY	OR:	OR SMALL ENTITY			
FOR		NUMBE	NUMBER FILED NUMBER EXTRA		RAT	E FEE	]	RATE	FEE		
BASIC FEE				BA SUL			345.00	OR		690.00	
TOTAL CLAIMS		34	/ minus 2	20= •	16	X\$ 9		OR	X\$18=	288	
INDEPENDENT CLAIMS 8 minus 3 = * 5			X39	=	OR	X78=	350				
MULTIPLE DEPENDENT CLAIM PRESENT						+130	=	OR	+260=	/	
* If the difference in column 1 is less than zero, enter "0" in column 2					TOTA	L	OR	TOTAL	13.18		
9-35-02 (Column 1) (Column 2) (Column 3)						SMAI	LL ENTITY	OR	OTHER THAN SMALL ENTITY		
ENT A	CI REM A	AIMS AAINING FTER NOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total • 5	3	Minus .	- 36_	= ///	X\$ 9	=	ОЯ	X\$18=	306	
	Independent • /	ON OF MI	Minus	PENDENT CLAIM	= <i>4</i>	X39=	=	OR	X84	336	
			JETA CE DE	CHOCKE OF IN	<u>"</u>	+130	-	OR	+260=		
a ne					TOT ADDIT. F		OR	TOTAL ADDIT. FEE	Ota		
d		lumn 1) AIMS		(Column 2)	(Column.3)						
AMENDMENT B	REA A	MAINING FTER NOMENT		NUMBER - PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total •	47	Minus '	. 53	=	X\$ 9:	-	OR	X\$18=		
AME	Independent •	12	Minus	10		X39=		OR	X78=		
	FIRST PRESENTATION	ON OF MI	JETIPLE DEP	ENDENT CLAIR	<u></u>	+130=	=	OR	+260=		
/	2 0 00					TOT ADDIT, F		OR	TOTAL ADDIT, FEE		
. (	1-04-03co	lumri 1)		(Column 2)	(Column 3)	NOD!!!!					
ENTC	REM A	LAIMS MAINING FTER NOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total •	54_	Minus	. 53	= /,	X\$ 9=	= ·	OR	X\$18=		
AME	Independent •	16	Minus	12	= 4	X39=		OR	X78=		
	FIRST PRESENTATION	.420			1260-	-					
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+260=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
	the highest number reviously raid rot (total of independent) is the highest number lound in the appropriate box in column 1.										